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Bib Data Sheet

CONFIRMATION NO. 9736

SERIAL NUMBER 09/975,501	FILING DATE 10/11/2001 RULE	CLASS 607	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. 015511-000002	
APPLICANTS John W. Cuzzo, Sewell, NJ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 11/09/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
ADDRESS 28722					
TITLE Apparatus and method for intra-oral stimulation of the trigeminal nerve					
FILING FEE RECEIVED 412	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		